PATENT APPLICATION SE	RIAL N	О.
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U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

12/01/2003 RADOFO1 00000029 10720317

01 FC:1001 02 FC:1201 03 FC:1202

770.00 OP 602.00 OP 594.00 OP

03/03/2004 JBALINAN 00000022 10720317

01 FC:1202 ·

576.00 OP

Adiustment date: 03/09/2004 JBALINAN 12/01/2003 AADOFO1 00000029 10720317 03 FC:1202 -594.00 OP

Repln. Ref: 03/09/2004 JBALINAN 0007451000 EAH:040731 Name/Number:10720317 FC: 9204 \$18.00 CR

PTO-1556 (5/87)

*U.S. Government Printing Office: 2002 - 489-267/69033

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10720317

CLAIMS AS FILED - PART I						SMALL ENTITY				OTHER THAN		
(Column 1) (Column 2)						TYPE			OR	SMALL	ENTITY	
TOTAL CLAIMS		52					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
то	TAL CHARGEA	BLE CLAIMS	5 minus 20= *			32		X\$ 9=		OR	, X\$18=	576
IND	EPENDENT CL	(<i>D</i> minus 3 = * 7			7	4	X43=		OR	X86=	602	
MULTIPLE DEPENDENT CLAIM PRESENT							+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2					olumn 2		TOTAL		OR	TOTAL	1948	
CLAIMS AS AMENDED - PART II								.'			OTHER	
		(Column 1)		(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	-	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	•	= .		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF M	Minus	***	T CLAIM			X43=		OR	X86=	
<u> </u>	·	MIANON OF W	OCTIFICE OCT	LINDEN	·			+145=		OR	+290=	
								TOTAL		OR	TOTAL ADDIT: FEE	
(Column 1) (Column 2) (Column 3)										AUUII. FEE	L	
AMENDMENT B		CLAIMS REMAINING		HIGH	IEST IBER	PRESENT			ADDI-		· ·	ADDI-
		AFTER AMENDMENT		PREVI	OUSLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**	-	=		X\$·9=		OR	X\$18=	
AME	Independent	* .	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								·			
								+145=		OR	+290=	
	•							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	<u>.</u>
		(Column 1)		(Colu	mn 2)	(Column 3)	_	•				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	· · · · · · · · · · · · · · · · · · ·	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1			On		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
**	If the "Highest Nu	mber Previously P	aid For" IN THI	S SPACE	is less tha	n 20, enter "20."	. ,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												